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Mississippi

Traffic Safety

Data Book

2014



Acknowledgements

The Public Safety Data Lab (PSDL) at Mississippi State University is honored to produce the 2014 Traffic Safety Data Book, which was funded through support from the Mississippi Office of Highway Safety. The support of Dr. Arthur G. Cosby, Director of Mississippi State University's Social Science Research Center, is greatly appreciated.

The Public Safety Data Lab is committed to providing relevant information on topics surrounding traffic safety in Mississippi. The 2014 Traffic Safety Data Book features statewide data as well as driving under the influence (DUI) specific topics including: Mississippi DUI laws, programs, costs and penalties and a personal story of how driving under the influence can change everything in a moment.

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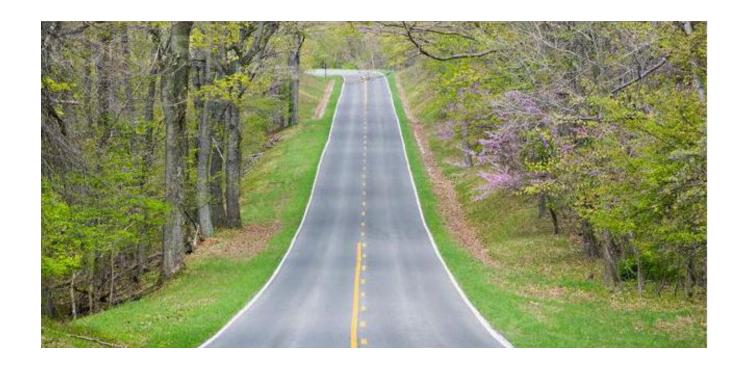
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Foreword



Message from the Commissioner:

The State of Mississippi has made many great accomplishments in highway safety over the years, but we can still do more. The State recorded 613 fatalities in 2013, which is an increase from 582 in 2012. Out of those 613 fatalities, 511 were occupants in a motor vehicle, 294 were unbelted drivers and passengers, 5 unknown (57.53%) and 210 were belted. The State also reported 179 alcohol-related fatalities, 2,564 alcohol related crashes and 771 alcohol related injuries in 2012. 2013 numbers are still being evaluated.

The State increased DUI arrest from 30,577 in 2012 to 31,918 DUI arrests in 2013 with 4,695 being drug related DUIs. Mississippi is also making strides in seatbelt usage and, although the seatbelt usage rate dropped in 2013 to a percentage rate of 74.4%, 2014 preliminary survey numbers indicate that the State seatbelt usage rate is on the rise in 2014 with numbers around the 78% range.

We still have a long way to go and many hurdles to overcome to make the Mississippi roadways free of fatalities, injuries and property losses, but with everyone's help we are getting closer and closer to zero fatalities.

Albert Santa Cruz, Commissioner Mississippi Department of Public Safety



Message from the Director:

The mission of the Mississippi Office of Highway Safety (MOHS) is to encourage and assist State and local agencies, insitutions and the private sector in establishing or expanding cooperative highway safety programs based on specifically identified traffic safety problems.

The overall goal is to reduce traffic crashes which result in death, injury and economic loss in the State. In order to accomplish this goal, activities are carried out in the areas of: alcohol/drug countermeasures, police traffic services including speed, occupant protection, traffic records, driver education, public information and enforcement, all funded through the National Highway Traffic Safety Administration (NHTSA).

The MOHS program operates under the provisions of the national priority grant program codified in a single section of the United States Code (23 U.S.C. 405 (Section 405), Moving Ahead for Progress in the 21st Century Act enacted July 6, 2012 and effective FY 2013.

MAP 21 established the requirement that states must develop core safety performance measures that are data-driven performance targets based on data and trend analysis.

Information collected in the 2014 Mississippi Traffic Safety Data Book provides an excellent source of information for state and local providers to use in accessing appropriate data to be used in grant applications and other programmatic resources.

The MOHS is proud to be a sponsoring participant in the development of this quality document of relevant traffic safety data for the state roadways. We express appreciation and thanks to the Mississippi State University Social Science Research Center and the Mississippi Public Safety Data Laboratory for the outstanding work on the 2014 Traffic Safety Data Book.

Sincerely,

Shirley Thomas, Office Director

MOHS / Governor's Representative



Introduction

Public traffic safety data is a collection of information that is analyzed in order to reduce driving-related fatalities, injuries, and crashes in Mississippi. Public safety data includes motor vehicle speed-related crashes, fatalities, DUIs, unbelted statistics as well as motorcycle, pedestrian, and bicyclist statistics. There are many variables that affect traffic safety such as road conditions, traffic, time of day, age, vehicle type, and weather. The Mississippi Office of Highway Safety (MOHS), Department of Public Safety (MS DPS), Department of Transportation (MDOT), Highway Patrol (MHP), local law enforcement officers, and researchers collectively worktogether to identify specific

problems and devise strategies to reduce fatalities and injuries on the roadways. The Traffic Safety Data Book is a resource for researchers, experts, policy-makers, and the broader public to use to accomplish the mission of reducing fatalities in Mississippi.

Unsafe at Any Speed, written by Ralph Nader in 1965, highlights when public traffic safety became a priority. This pioneering work put public safety at the forefront by advocating safety features in automobiles, including seat belts. The book illustrated the value of

data collection and analysis in the automobile industry and initiated the path for future research for improving traffic safety.

Signed into law in 1966, the National Traffic and Motor Vehicle Safety Act empowered the United States government to set and regulate new safety standards for motor vehicles and road traffic safety. The creation of the National Highway Traffic Safety Administration was a result of this action. This marked the beginning of several initiatives to decrease the number of fatalities and injuries on America's roadways.

Also signed into law in 1966, the National Highway

States are a vital partner in improving safety on our nation's roadways.

- David Friedman, NHTSA Administrator

Safety Act formed the coordinated effort between states and the federal government to make our nation's

> roadways safer. Born out of this legislation, the Mississippi Office of Highway Safety was created organize efforts between the federal government and agencies, non-profits, and other institutions within the state. The Mississippi Office of Highway Safety falls under the purview of the Mississippi Department of Public Safety and seeks "to develop initiatives to reverse the steady upward trend of traffic fatalities and injuries..."and reduce the economic losses associated with motor vehicle





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- Shirley Thomas, Office Director MOHS/ Governor's Representative

accidents." MOHS also serves "to increase the public awareness of traffic crash problems and stimulate the development and implementation of programs that will impact the crash problem." MOHS administers and oversees the allocation of federal highway safety grants.

In 1979, the National Highway Traffic Safety Administration created the New Car Assessment Program (NCAP), which encouraged manufacturers to build safer vehicles. The program evaluates new automobile designs for performance against various safety threats. Over time, the New Car Assessment Program has added safety-rating programs. These safety ratings are formulated during controlled crash and rollover tests conducted at the National Highway Traffic Safety Administration research facilities.

Signed into law in 2012, the Moving Ahead for Progress in the 21st Century Act (MAP-21) is the first long-term federal highway authorization to be enacted since 2005 that funds surface transportation programs. MAP-21 consolidates and streamlines federal highway transportation programs. The legislation made key investments in infrastructure, which funded performance-based programs to achieve safety goals. MAP-21 merges various stakeholders such as

transportation departments, law enforcement agencies, public safety departments, research institutions, and non-profit organizations to allow for collaboration, improvements in project delivery, and increased innovation.

The National Highway Traffic Safety Administration has supported the Mississippi Office of Highway Safety in creating high-profile statewide multimedia and enforcement campaigns using billboards, television commercials, and visual enforcement. Such notable titles include the "Click It or Ticket" public safety campaign to increase the awareness of the importance of seat belts and the "Drive Sober or Get Pulled Over" public safety campaign to increase the awareness of consequences of drunk driving. The 2014 Traffic Safety Data Book is another important way that the Mississippi Office of Highway Safety engages in public safety outreach to educate and inform Mississippians including stakeholders such as transportation departments, law enforcement agencies, public safety departments, research institutions, and non-profit organizations—in order to reduce the number of fatalities, injuries, and traffic problems on Mississippi roadways.

DUI DUI

Introduction

Driving under the influence (DUI) is the act of operating a motor vehicle while impaired due to alcohol or any other substance. This has been an ever-evolving issue in the United States. The first laws occurred around the start of the 20th century, and since the 1970's and 80's, with the help of organizations like Mothers Against Drunk Driving (MADD), a national spotlight on DUIs has emerged. Since that time Mississippi and the nation has experienced a major shift in culture, values, and methods for attempting to put an end to the destructive consequences that can result from driving under the influence. Accompanied by public awareness and policy initiatives; the technology for testing, tracking, and analyzing

both DUI drivers and DUI data has grown exponentially.

Mississippi along with the federal government and other states has taken strides to figure out ways of dealing with driving under the influence. The reduction of driving under the influence has been multifaceted with approaches varying from enforcement to treatment to public outreach and awareness. This chapter will explore the legal frameworks, the data, and programs that have been developed to combat driving under the influence in Mississippi. Research utilizing data and new approaches to the reduction of DUIs remain a top priority in Mississippi's mission to drive down fatalities.



Our Traffic Safety Resource Prosecutor serves as a resource for our prosecutors, our law enforcement officers and our judges in DUI/ traffic-related issues. We hope that through data-driven partnerships like this one formed with Mississippi State and the Department of Public Safety that we will see a significant

reduction in the number of impaired driving cases in our state.



- Jim Hood, Mississippi Attorney General



Molly Miller is Mississippi's Traffic Safety Resource Prosecutor (TSRP), in the DUI unit, part of the Office of the Attorney General. Ms. Miller, the former Hinds county assistant district attorney, served as a prosecutor of sex crimes, child abuse, and domestic violence. Ms. Miller became the TSRP in

2006. In this role she acts as a prosecutor, a resource, and a liaison, while also providing technical legal assistance and training to all the State's prosecutors, law enforcement officers, and judges.

Ms. Miller coordinates the training of all state prosecutors on traffic safety issues, primarily DUI prosecutions, and provides legal assistance on matters related to such cases. Such assistance includes, but is not limited to: assisting with pre-trial investigations; upon request, serving as lead or second chair or assisting in the prosecution of DUI, vehicular homicide, DUI Death, or DUI Maiming court cases; researching and writing motions and briefs; drafting DUI legislation;

writing and updating the DUI Manual; and preparing a newsletter regarding "hot topic" issues of highway safety. Ms. Miller also coordinates joint training of prosecutors with their local law enforcement officers by corroborating with the Mississippi Law Enforcement Liaison's Office. She is available daily to prosecutors, law enforcement, and judges should the need for assistance in DUI and traffic-related cases arise. In the past fiscal year, she provided DUI training to approximately 1,500 judges, prosecutors, and law enforcement officers.

Ms. Miller also participated in numerous traffic safety organizations and trainings both statewide and nationally. These include, the MS Association of Highway Safety Leaders, S.T.O.R.M. (Sobriety Trained Officers Representing Mississippi), National Association of Prosecutor Coordinators meetings, and the Int'l Assoc. of Chiefs of Police Training Conference on Drugs, Alcohol, and Impaired Driving.

Molly's impact as TSRP is widespread, leaving lasting footprints in the collaborative effort of reducing impaired driving in Mississippi.

On the Legislative Horizon

- Texting Ban / Distracted Driving
- Revisions to Seat Belt Laws
- Promoting DUI Drug Courts
- Expansion of Radar Use by Sheriffs

In 2008, MS became the 45th Drug Recognition Expert (DRE) state. A DRE is a highly effective officer skilled in the detection and identification of persons impaired by alcohol and/or drugs. A DRE is trained to conduct a systematic and standardized 12-step evaluation consisting of physical, mental, and medical components. Currently, Mississippi has 49 Drug Recognition Experts.

- Attorney General Annual Report (2014)



What Constitutes a Driving Under the Influence Charge?

MS Code §63-11-30:

21 and Older

- .08% BAC (Blood Alcohol Concentration)

Under 21 (Zero-Tolerance)

-.02% BAC

Commercial Motor Vehicle

- .04% BAC
- CMV Suspensions provided in § 63-1-216

All persons considered in violation of DUI if found to be:

"Under the influence of any substance that has impaired the person's ability to operate a motor vehicle and/or any drug or controlled substance, the possession of which is unlawful under the Mississippi Controlled Substance Law."

Child-Endangerment DUI

Violation of the DUI law with a child under the age of 16 as a passenger

Non-Injury

1st Offense - Misdemeanor

- Fine of no more than \$ 1,000 and/or no more than 12 months in jail

2nd Offense - Misdemeanor

- Fine between \$1.000 and \$5,000 and/or 1 year in jail

3rd and Subsequent Offense - Felony

- Fine of no less than \$10,000 and/or 1 to 5 year imprisonment

Injury/Death of a Child

All Offenses - Felony

- Fined no less than \$10,000 and imprisonment for no less than 5 years nor more than 25 years

What is Implied Consent to Chemical Tests?

MS Code §63-11-5

"Any person who operates a motor vehicle upon public highways, public roads and streets of this state shall be deemed to have given his consent.... to a chemical test or tests of his breath for purpose of determining alcohol concentration... A person shall give his consent to a chemical test or tests of his breath, blood or urine for the purpose of determining the presence in his body of any other substance which would impair a person's ability to operate a motor vehicle."

What happens if you refuse the DUI test?

"Failure to submit to such chemical test or tests of his breath shall result in the suspension of his privilege to operate a motor vehicle upon the public streets and highways of this state for a period of ninety (90) days in the event such person has not previously been convicted of a violation of Section 63-11-30, or, for a period of one (1) year in the event of any previous conviction of such person under Section 63-11-30."

What are the DUI penalties and DUI program requirements?

First Offense

- \$250 to \$1,000 fine
- Up to 48 hours in jail
- Must attend Mississippi Alcohol Safety Education Program (MASEP)
- The person may be eligible for another form of license after mandatory 90 day ignition interlock restricted license and completion of MASEP.

Did You Know?

Every 90 seconds, someone is injured in a drunk driving crash.

- Debbie Weir, MADD

Third and Subsequent Offense

- Violation of DUI laws within 5 years receiving the 1st and 2nd charge and constitutes a **FELONY**.
- \$2,000 to \$5,000 fine
- Imprisoned no less then 1 year or more than 5 years
- 3 year ignition interlock restricted license after incarceration
- Requires an in-depth diagnositc assessment and if determined to be in need of treatment for alcohol and/or drug abuse the person shall successfully complete treatment.

Zero-Tolerance (under 21) Penalties and Programs

Must have BAC above .02 and below .08; Standard Offense penalties will otherwise be levied

Second Offense

- Violation of DUI laws within 5 years of receiving the 1st charge
- \$600 to \$1,500 fine
- Imprisoned between 5 days and 1 year
- Community service between 10 days and 1 year.
- Eligible for another form of license after mandatory 1 year ignition interlock restricted license
- Requires an in-depth diagnositc assessment and if determined to be in need of treatment for alcohol and/or drug abuse the person shall successfully complete treatment

First Offense

- 90 day driver's license suspension, \$250 fine, MASEP, may also require victim impact panel
- May be reduced to 30 days if hardship petition (\$50 fee) is filled and found necessary

Second Offense

- (Commited within 5 year period) No more than \$5,000 fine, 1 year license suspension
- May be reduced to 6 months with successful completion of alcohol or drug abuse treatment at DMH certified site

Third and Subsequent Conviction

- [Commited within 5 year period] Fine up to \$1,000 dollars; Suspension up to the age of 21 or two years (whichever is longer).
- Must complete treatment of alcohol and/or drug abuse program at site certified by DMH.



Nonadjudication

Adjudication is "the judgment given" and therefore nonadjudication is non-judgment – it is neither innocence nor guilt and is established to keep prior convictions off an individual's record (Black's Law Dictionary, 2nd edition).

- Nonadjudication is allowed only for those individuals who submit to chemical test in non-violation of implied consent.
- An individual is only eligible for nonadjudication one time.
- It is conditioned upon the successful completion of any conditions imposed by the court including:
 - paying a nonadjudication fee; paying all fines, penalties and assessments that would have been imposed upon conviction; attending and completing MASEP; installation of an ignition interlock device, obtaining and maintaining an interlock restricted license for 120 days, and providing vender documentation that the individual has no violations of the ignition interlock device.
- The court may also require alcohol and drug screening, attendance at a victim-impact panel, proof of immobilization or impoundment of an individual's vehicle, and/or proof the individual has not committed any other traffic violations while under court supervision.
- A confidential registry shall be maintained for 5 years and may be accessed by judges and prosecutors to determine eligibility for nonadjudication.

§63-11-30: The court shall order installation and use of an ignition interlock device as provided in Section 63-11-31 for every vehicle operated by a person convicted or nonadjudicated.

Ignition Interlock

- The cost of the device shall be borne by the offender.
- Installation and calibration shall occur at the residence of the offender.
- In addition to fees under \$63-11-30, a fee between \$30 and \$100 is deposited into the Ignition-Interlock Device Fund and this shall be \$250 if the individual receives a nonadjudication.
- Cost under \$63-11-30 include up to \$150 for installation of the device and \$2.50 per day user fee. Additional fees for periodic inspections, calibrations and repairs may be prescribed by the Department of Public Safety.
- Individuals must also provide proof of installation, have the system monitored, only operate ignition-interlock equipped vehicles, not tamper with the device, not solicit or receive help in starting the equipped vehicle, or be provided a non-equipped vehicle.
- Persons violating the previous section (both ignition interlock required drivers and/or those knowingly giving aid) are in violation of this subsection and upon conviction shall be fined between \$250 and \$1000 and/or imprisoned for up to 1 year.

DISCLAIMER: The materials and information presented in this book are for informational purposes only and not to be taken as legal advice. While we attempt to provide accurate and current information, the material presented is abridged and subject to change. It should not be considered as a substitute for professional legal counsel. Should you be in need of legal consult; contact your attorney.

DUI - IS IT WORTH IT?

The Average Cost of a DUI is \$10,000

Pay
1.5 years
university or
4 years
junior college
tuition

Pay 13.5 years of auto insurance

Feed a family for 12 months

Pay 14 months rent on a 2 bedroom apartment YOU COULD

Drive across the U.S. 20 to 25 times

Purchase topline Apple products & have \$4,850 for iTunes. Pay
2 years
family health
insurance
premiums



Traffic Fatalities Have Been Declining Steadily Since 2005: Why?

by Guangqing Chi, South Dakota State University

The United States experienced more than 40,000 traffic fatalities every single year from 1963 to 2007 (with an exception in 1992; NHTSA 2013). In 2008, US roadway deaths fell to 37,423, which is the lowest point since before 1963 and is 9.1% lower than in 2007. The recent decline in traffic fatalities started in 2005 and continued steadily to 2011, with a slight increase in 2012. Despite the steady decline in traffic fatalities, road crashes remain a major public health problem worldwide. Road deaths are a tragedy for all affected and injuries

"In 2008, U.S. roadway deaths fell to the lowest point since 1963."

can cause distress and life-changing misfortune. Crashes in the US result in annual economic loss of over \$200 billion (NHTSA, 2013). Further, the Moving Ahead for Progress in the 21st Century (MAP-21) law, which was recently passed, requires states to increase focus on

safety performance targets and implement programs that can best utilize limited resources for reaching the targets.

However, there no comprehensive understanding of what factors have contributed to the recent decline in traffic fatalities. It is essential to the identify contributing factors because transportation decision makers and planners need such information for designing and implementing the most efficient programs to continually and efficiently reduce traffic fatalities. In the paragraphs that follow, the potential contributing factors are reviewed and discussed.

Interventions for safer driving and road user behavior of all road use behaviors, seat belt usage and alcohol consumption are most linked to traffic crashes and fatalities. While measuring seat-belt usage, researchers have found that with increased usage, fatalities decrease but not injuries (Chi et al., 2011; Noland, 2003b). Alcohol consumption per capita is another variable that has been demonstrated to increase drunk-driving traffic-related fatalities and injuries and total traffic related fatalities and injuries (Chi et al., 2011; Noland & Quddus, 2004). The research on the effects of speeding is unclear: at least one study hesitantly links speeding to fatalities (Campbell & Ross, 1968); and another study found no link between speeding and fatalities (Lave, 1985).

Distracted driving, such as using cell phones to talk or text while driving, is a serious public health concern in the United States, with 5,474 fatalities in 2009 alone linked to drivers

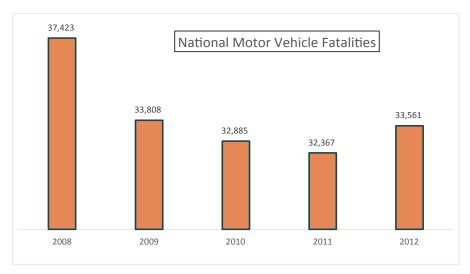


Figure - 1

Figure 1 illustrates the decline of fatalities from 2008-2011. There was a 10% decrease in fatalities from 2008 to 2009. Fatalities reached their lowest point in 2011 with 32,367. In 2012 motor vehicle fatalities rose by about 4% to 33,561 deaths.

who were distracted (NHTSA, 2010). The use of cell phones and other mobile communication devices while driving has been shown to be detrimental to driving performance (Caird et al., 2008; Strayer et al., 2006) and to put drivers at increased risk for being in a crash (McEvoy et al., 2005; Redelmeier & Tibshirani, 1997). Accordingly, all 50 states have now in reducing traffic considered (NCSL, fatalities." 2010) and most have passed laws that restrict the use of cell phones or mobile communication devices while driving. However, state distracted driving laws can differ in several ways, including, but not limited to the following: a) the types of activities (talking, texting, etc.) that are restricted; b) the categories of drivers (novice, bus drivers, all drivers) the laws apply to; c) the manner in which devices may be used (handheld and hands-free vs. hands-free only); d) the type of offense (primary vs. secondary enforcement); and e) associated penalties (Anderson et al., 2011; Ibrahim et al., 2011; IIHS, 2010a). In addition to legislation considerations, some states have also developed a distracted driving "climate" that increases awareness of the risks of distracted driving, via educational materials and campaigns, and the inclusion of distracted driving in the state's highway safety plan. These efforts may serve to deter distracted driving by making drivers more aware of

Demographic and cultural change

DOT, n.d.).

Much of the traffic safety research on demographics has involved age cohorts. In general, young drivers are seen as risk takers and are involved in more traffic crashes than older drivers. The change of young drivers, in both quantity and behaviors, is possibly associated with the decline in traffic fatalities in the U.S. in the past ten years or so, and we argue for three types of changes.

the safety concerns. Some suggest that it will take the combination of these efforts (i.e., laws that are enforced

coupled with education) to curb distracted driving (US

First, gasoline prices have higher and more immediate effects on reducing fatal and injury crashes involving young drivers (Chi et al., 2010, 2012, 2013a, 2013b; Grabowski & Morrisey, 2004). Gasoline price increases from 2000 to 2008 had a strong effect on reducing fatal and injury crashes of Vehicle safety advances youth because risk-prone young drivers are more are seen as the single likely to be priced out of most important factor the market (Chi et al., 2010), and the remaining drivers on average are more

Second, more young people live with their parents, which in turn may reduce their risky driving behaviors and the possibility of consequent traffic crashes. According to the US Census Bureau, an increasing proportion of young people lived with their parents from 2005 to 2011 due to the economic recession (http://www.census.gov/newsroom/releases/archives/families_households/cb11-183.html). Men aged 25-34 living with their parents increased from 14% in 2005 to 19% in 2011; from 8% to 10% for women aged 25-34; from 53% to 59% for men aged 18-24; and from 46% to 50% for women aged 18-24.

risk-averse and safe.

Third, fewer young drivers drive due to culture changes of the Smart Phone versus car. Cars, which have been the symbol of success and freedom, are losing such power among the young generation. Rather, the young generation is increasingly symbolized with a Smart Phone (Schoettle & Sivak, 2014).

In addition, the aging population is also affecting traffic safety. The Baby Boom population is beginning to reach retirement age; thus there may be declines in the worker population. Alternatively, the American workforce may see increases in the older worker population. This demographic shift could have important implications for traffic safety and transportation planning.

Economic downturn and economics of traffic safety

It is important to look into economic factors as possible contributors to fatality reduction because the US has experienced both fatality decline and economic difficulties in the past ten years or so. The large body of literature on the economics of road safety found that economic factors have important association with traffic crashes (Joksch, 1984; Kopits & Cropper, 2005; Sivak & Schoettle, 2010; Traynor, 2009; Wagenaar, 1984). The literature in general

suggests that economic conditions have a negative association with traffic crashes. These studies have shown that in more prosperous economic conditions, people drive more and with

"More prosperous economic conditions result in more traffic crashes."

less reserve, which results in more traffic crashes. Contrary to conventional wisdom, states with higher per capita income have higher trafficrelated fatality and injury rates (Noland, 2003a, 2003b). However in leaner economic times, people drive less and more conservatively, resulting in safer traffic conditions. Two tangible links from traffic safety to the economy are income and unemployment rates. Those with lower income are limited in their ability to buy gasoline, reducing the frequency and distance of their trips. They might also adapt their multiple, single-purpose trips into fewer, multi-purpose trips. Some may forego auto ownership. Higher unemployment rates could have many of the same effects as lower income in addition to fewer work-related trips. Unemployment and income are both significantly associated with traffic safety. A limited but increasing body of literature also associates fewer traffic crashes with higher gasoline prices or taxes (Chi et al., 2013a). It is found that gasoline price increases are generally associated with the decline in crashes, as expected, and crash rates, which is not necessarily expected. The finding for crash rates is explained as marginal drivers being priced off the roads when gas prices are high or employment and incomes are low.

Emergency response and trauma care advancements

The association of traffic fatalities with the improvement in medical care and technology, especially in emergency response and trauma care, has been widely studied. Improved emergency services help reduce traffic deaths as every second counts. However, this is a particularly difficult construct to measure; much of the research in the area has used different proxy measures for improvements in medical care and technology. Noland (2003a) used three

proxy variables—total mortality rate, physicians per capita, and average acute care days in the hospital—to study factors contributing to the traffic fatality changes in the US.

He concluded that these indicators may be less significant in the future as these improvements may come at a slower rate than they have for the past twenty to thirty years. In another study Nolan and Quddus (2004) found that the number of National Health Service (NHS) staff per capita, the people awaiting treatment at a hospital, and the average length of stay all have varying influences on traffic fatalities. Average length of stay illustrates an advancement of technology and is the most statistically significant factor while the other two likely illustrate the level of resources put into medical care.

Vehicle safety advancement

Past advancements such as seatbelts, airbags, and anti-lock brakes coupled with improved active and passive vehicle safety devices such as electronic stability control and driver assistance systems help reduce traffic fatalities and serious injuries when crashes occur. Vehicle safety devices have advanced dramatically and are seen by many researchers as the single most important contributory factor in reducing traffic fatalities.

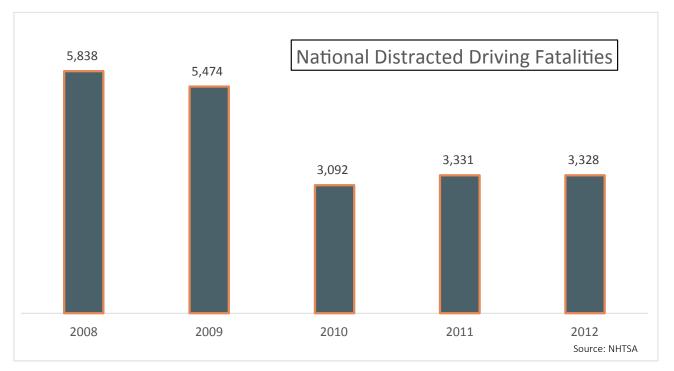


Figure - 2

Figure 2 shows the trend of fatalities due to distractions while driving from 2008-2012. The highest was in 2008 with 5,838 deaths, followed by 2009 with 5,474. Beginning in 2010 through 2012, fatalities have declined with the lowest figure in 2010 (3,092).

Infrastructure

Conventional engineering wisdom would lead one to believe the improvements to our roadways such as greater number of lanes and wider lanes would be safer for their drivers, but there are findings in the literature that may be somewhat counterintuitive. Increased number of lanes is associated with increased traffic crashes and traffic-related fatalities (Noland, 2003b). Additionally, as lane widths increase, traffic crashes and fatalities increase (Noland & Oh, 2004). This can likely be explained by the response of the driver as opposed to road infrastructure itself. Perhaps, drivers feel safer and more comfortable with these lane changes, which may lead to increased speed and less cautious driving behaviors. On the other hand, increased shoulder width is associated decreased traffic crashes. These points would initially lead traffic officials to increase shoulder widths rather than widening lanes and increasing their number, but more research is required to properly address this question.

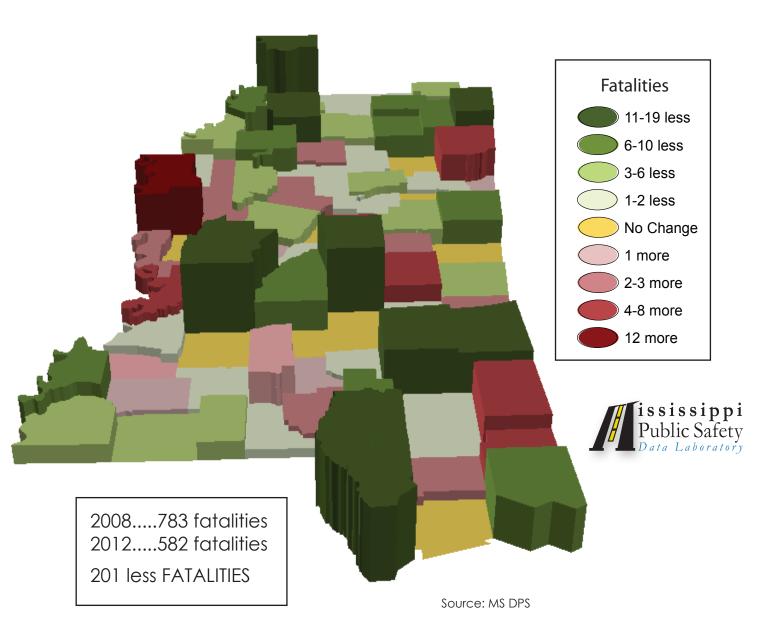
Conclusion

In sum, the recent decline in traffic fatalities could be caused by road user behavior improvements; training, education, campaign, and law enforcement interventions for safer driving; demographic and cultural change; economic downturn; emergency response and trauma care advancements; vehicle safety advancement; infrastructure improvement; and perhaps other factors. Future research should employ comprehensive crash data to systematically examine these factors and their relative impacts on fatality reduction. Doing so would provide a more comprehensive understanding of what factors have contributed to the recent decline in traffic fatalities and to what extent.

^{*} The author would like to acknowledge the Public Safety Data Lab, Willie Brown, David Levinson, Ginger Cross, and Mohammed Quddus for their input and comments on the earlier version of this policy brief.

What's Trending?

Motor Vehicle Fatality Differences Between 2008 and 2012



Map - 1



Introduction

Traffic safety data is essential in understanding crashes and fatalities on Mississippi's roadways. Data encompasses a vast array of different variables including: weather and road conditions, driver demographics, driver contributing circumstances (i.e. speed-related, alcohol-related, non-belt use, etc.), time of day, road-type, etc. Data driven approaches to crash and fatality reduction are key elements in public safety planning. The promotion of such an approach is the cornerstone of the federal Moving Ahead for Progress in the 21st Century Act (MAP-21). The National Highway Traffic Safety Administration (NHTSA) provides MAP-21 funding to various states utilizing these data driven approaches in their public safety planning

The Mississippi traffic safety data is collected by the Mississippi Department of Public Safety (MS DPS) and analyzed to understand the how and why crashes happen. Data is provided to inform and educate Mississippians—including stakeholders such as transportation departments, law enforcement agencies, public safety departments, research institutions, and non-profit organizations—on traffic safety for the purpose of reducing the number of fatalities, injuries, and traffic crash problems on Mississippi roadways. Contributory factors, county and city ranks, demographics, and more will be used display the current state of public traffic safety in Mississippi.

Map 1 displays the differences in motor vehicle fatalities from 2008 and then in 2012. The range of greens on the map show counties that had less fatalities in 2012 as compared to 2008. DeSoto County had the largest decrease (19), followed by Hinds (16) Hancock and Scott (15) counties. There were 11 counties that had no change at all. The range of reds on the map show counties that had more fatalities in 2012 compared to 2008. Washington County had the largest increase (12), followed by Leake, Green and Monroe (8) and Newton (6). Overall, Mississippi improved with 201 less motor vehicle fatalities in 2012 (582) than in 2008 (783).

APRIL IS NATIONAL DISTRACTED DRIVING AWARENESS MONTH

DATA

RANKING FATALITIES by TYPE - 2008-2012 (average)											
RANK	COUNTY	Total	RANK	COUNTY	Total	RANK	COUNTY	Alcohol	RANK	COUNTY	Alcohol
1	Hinds	39.8	42	Yazoo	6.2	1	Hinds	13.4	42	Prentiss	1.8
2	Harrison	29.0	43		5.6	2	Harrison	9.4	43	Lamar	1.8
3	DeSoto	22.0	44	Leflore	5.6	3	Panola	6.6	44	Tallahatchie	1.8
4	Jackson	21.4	45	Wayne	5.4	4	Jackson	6.6	45	Tunica	1.8
5	Forrest	20.6	46	Prentiss	5.4	5	Rankin	6.2	46	Madison	1.6
6	Rankin	20.4	47	Attala	5.4	6	DeSoto	5.8	47	Winston	1.6
7	Jones	20.0	48	Oktibbeha	5.2	7	Forrest	5.8	48	Tishomingo	1.6
8	Pearl River	15.8	49	Tunica	5.2	8	Hancock	5.4	49	Coahoma	1.6
9	Panola	15.0	50	Clarke	5.2	9	Lee	5.2	50	Sunflower	1.6
10	Lee	15.0	51	Yalobusha	5.0	10	Marshall	5.2	51	Calhoun	1.4
11	Hancock	14.4	52	Tallahatchie	4.6	11	Neshoba	4.6	52	Amite	1.4
12	Washington	14.4	53	Winston	4.6	12	Pearl River	4.2	53	Tippah	1.2
13	Lauderdale	14.0	54	Carroll	4.6	13	Jones	4.2	54	Jefferson	1.2
14	Marshall	12.8	55	Calhoun	4.4	14	Warren	4.2	55	Newton	1.2
15	Copiah	12.2	56	Greene	4.2	15	Tate	3.4	56	Jasper	1.2
16	Warren	11.6	57	Sunflower	4.0	16	Washington	3.4	57	Attala	1.2
17	Scott	11.2	58	Amite	4.0	17	Alcorn	3.2	58	Greene	1.2
18	Neshoba	11.0	59	Jasper	4.0	18	Pike	3.2	59	Carroll	1.2
19	Tate	10.4		Grenada	4.0	19	Lincoln	3.2	60	Clarke	1.2
20	Lincoln	10.2	61	Perry	4.0	20	George	2.8	61	Grenada	1.2
21	Pike	10.0	62	Montgomery	4.0	21	Copiah	2.8	62	Wilkinson	1.2
22	Covington	9.8	63	Stone	3.8	22	Yalobusha	2.8	63	Humphreys	1.2
	Alcorn	9.6	64	Jefferson	3.8	23	Lauderdale	2.6		Perry	1.0
24	George	9.6	65	Lawrence	3.8	24	Scott	2.6	65	Walthall	1.0
25	Marion	9.6	66	Benton	3.8		Bolivar	2.6	66	Jeff Davis	1.0
26	Holmes	9.4	67	Jeff Davis	3.6	26	Itawamba	2.6	67	Quitman	1.0
27	Lamar	9.4	68	Chickasaw	3.6	27	Holmes	2.4	68	Lawrence	0.8
28	Itawamba	9.0	69	Wilkinson	3.2	28	Wayne	2.4		Leflore	0.8
29	Simpson	9.0	70	Smith	3.2		Covington	2.4	70	Chickasaw	0.8
	Bolivar	8.4		Walthall	3.0		Leake	2.4		Smith	0.8
31		8.4		Humphreys	2.6		Pontotoc	2.4	72	Benton	0.8
32		8.0		Claiborne	2.6		Union	2.2	_	Kemper	0.8
33		7.6		Quitman	2.2		Yazoo	2.2		Claiborne	0.6
34		7.6		Sharkey	2.2		Marion	2.0	_	Montgomery	0.6
35		7.6		Kemper	2.0	_	Adams	2.0		Sharkey	0.4
	Coahoma	7.6	77	· ·	2.0		Lowndes	2.0		Noxubee	0.4
37	Pontotoc	7.2		Clay	1.8		Monroe	2.0		Issaguena	0.4
	Union	6.6		Webster	1.2		Oktibbeha	2.0		Clay	0.4
	Tishomingo	6.6		Franklin	1.2		Simpson	2.0		Webster	0.2
40		6.6	81		1.0		Stone	2.0		Franklin	0.2
41		6.4	82		0.8		Lafayette	1.8	82		0.2

Table 1

County Fatality Rankings

Tables 1 & 2 show the 82 Mississippi counties' average number of fatalities per year, in ranking order, by type (2008-2012). In table 1, Hinds County had the highest overall average fatality count (39.8), followed by Harrison (29.0), DeSoto (22.0), Jackson (21.4) and Forrest (20.6). Table 1 also includes counties with the highest alcohol-related fatalities by ranking order with Hinds (13.4), Harrison (9.4), Panola and Jackson (6.6), and Rankin (6.2) being the top 5 counties.

RANKING FATALITIES by TYPE - 2008-2012 (average)											
Rank	County	Speeding	Rank	County	Speeding	Rank	County	Motorcycle	Rank	County	Motorcycle
1	Hinds	10.0	42	Tishomingo	1.2	1	Harrison	3.6	42	Tishomingo	0.4
2	Harrison	8.0	43	Yazoo	1.2	2	Jackson	3.2	43	Newton	0.4
3	Rankin	7.8	44	Oktibbeha	1.2	3	DeSoto	2.6	44	Oktibbeha	0.4
4	DeSoto	5.6	45	Tunica	1.2	4	Hinds	2.4	45	Clarke	0.2
5	Pearl River	5.2	46	Winston	1.2	5	Forrest	1.8	46	Scott	0.2
6	Jones	4.8	47	Claiborne	1.2	6	Hancock	1.8	47	Stone	0.2
7	Panola	4.8	48	Jeff Davis	1.2	7	Lee	1.6	48	Tippah	0.2
8	Lauderdale	4.6	49	Neshoba	1.0	8	Jones	1.6	49	Jasper	0.2
9	Hancock	4.0	50	Covington	1.0	9	Pearl River	1.4	50	Lafayette	0.2
10	Marion	4.0	51	Calhoun	1.0	10	Marion	1.2	51	Lincoln	0.2
11	Madison	4.0	52	Perry	1.0	11	Panola	1.0	52	Prentiss	0.2
12	Jackson	3.4	53		1.0	12	Lauderdale	1.0	53	Walthall	0.2
13	Scott	3.4	54	Chickasaw	1.0	13	Rankin	1.0	54	Lawrence	0.2
14	Forrest	3.2	55	Walthall	1.0	14	Lowndes	1.0	55	Tunica	0.2
15	Alcorn	2.6	56	Jefferson	0.8	15	Greene	1.0	56	Webster	0.2
16	Holmes	2.6	57	Simpson	0.8	16	Warren	0.8	57	Bolivar	0.0
17	Lee	2.4		Newton	0.8	17	Lamar	0.8	58	Holmes	0.0
18	Pike	2.4		Attala	0.8		Marshall	0.8		Claiborne	0.0
19	Tate	2.2	60	Jasper	0.8	19	Itawamba	0.8	60	Grenada	0.0
20	Lincoln	2.2		Montgomery	0.8		Tate	0.8	61	Humphreys	0.0
21	Bolivar	2.2	62		0.8	21	Leake	0.8	62		0.0
22	Lafayette	2.2	_	Clarke	0.6		Copiah	0.8	63		0.0
23		2.2		Carroll	0.6		Madison	0.8	64		0.0
24	Marshall	2.0	65	Greene	0.6	24	Neshoba	0.6	65	Franklin	0.0
25		2.0	_	Sunflower	0.6		Union	0.6	_	Jefferson	0.0
26		2.0	67		0.6		Yalobusha	0.6		Sunflower	0.0
27	Adams	2.0	68		0.6	_	George	0.6	68		0.0
28	Lamar	1.8	_	Quitman	0.6		Leflore	0.6		Issaquena	0.0
29	Lowndes	1.8		Leake	0.4	_	Monroe	0.6		Montgomery	0.0
30		1.8	_	Pontotoc	0.4	_	Alcorn	0.6	71	<u> </u>	0.0
31	Lawrence	1.8		Grenada	0.4		Clay	0.6	72		0.0
32	Copiah	1.6		Sharkey	0.4		Benton	0.6	73		0.0
33	Itawamba	1.6		Noxubee	0.4		Washington	0.4		Carroll	0.0
34		1.6	_	Webster	0.4		Pike	0.4	_	Chickasaw	0.0
35	Yalobusha	1.6	_	Wilkinson	0.2	_	Simpson	0.4	76		0.0
36		1.4		Humphreys	0.2		Adams	0.4	77		0.0
37	Monroe	1.4		Clay	0.2		Coahoma	0.4	_	Perry	0.0
38		1.4		Franklin	0.2		Covington	0.4		Quitman	0.0
39	Tallahatchie	1.4	80		0.2		Winston	0.4	_	Sharkey	0.0
40	Coahoma	1.2	81	Issaguena	0.2	40		0.4	81	Smith	0.0
	Tippah	1.2		Kemper	0.2			0.4		Tallahatchie	0.0
41	пррап	1.2	82	Kemper	0.0	41	POHIOLOC	0.4	82	rananatenie	0.0

Table 2

Table 2 shows in ranking order, the average number of fatalities per year, where speeding or a motorcycle was involved in the fatality. For speed-related fatalities, Hinds County was the highest with 10.0, followed by Harrison (8.0), Rankin (7.8), DeSoto (5.6) and Pearl River (5.2). The top 5 highest ranked motorcycle average fatality counties for the same time period were as follows, Harrison (3.6), Jackson (3.2), DeSoto (2.6), Hinds (2.4) and Forrest (1.8).

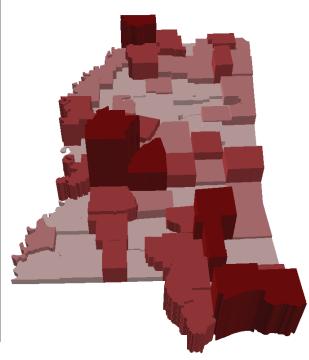
DATA

*Average Motor Vehicle Fatalities 2008-2012

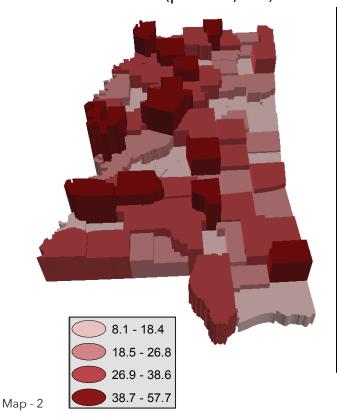
*Average # of fatalities per year based on total

Rank County *Average 1 Hinds 39.8 2 Harrison 29.0 3 Desoto 22.0 4 Jackson 21.4 5 Forrest 20.6 6 Rankin 20.4 7 Jones 20.0 8 Pearl River 15.8 9 Panola 15.0 10 Lee 15.0 11 Hancock 14.4 12 Washington 14.4 13 Lauderdale 14.0 14 Marshall 12.8 15 Copiah 12.2 16 Warren 11.6 17 Scott 11.2 18 Neshoba 11.0 19 Tate 10.4 20 Lincoln 10.2

Average Motor Vehicle Fatalities *



Weighted Average Motor Vehicle Fatalities (per 100,000)**



Rank	County	Weighted per 100K
1	Issaquena	57.7
2	Holmes	50.0
3	Covington	50.0
4	Jefferson	49.8
5	Tunica	49.6
6	Sharkey	45.8
7	Carroll	44.1
8	Benton	43.5
9	Panola	43.5
10	Copiah	42.1
11	George	41.9
12	Yalobusha	40.3
13	Scott	39.6
14	Itawamba	38.6
15	Montgomery	37.7
16	Neshoba	36.9
17	Tate	36.5
18	Marion	36.3
19	Marshall	35.0
20	Wilkinson	33.9

Source: MS DPS

0.8 - 4.6
4.7 - 9.0
9.1 - 15.8
15.9 - 39.8

** Weighting is the process of making data proportionate.





As a Law Enforcement Officer for over 30 years writing tickets and making arrests are an inevitable part of the job, but... It's not about how many tickets we write or DUI's we arrest, it's about SAVINGS LIVES, reducing fatal crashes, injuries and severity of injuries.

Captain McCain, Executive Director,
 Division of Public Safety Planning

Map 2 shows a 3D representation of the average motor vehicle fatalities by county. The lighter shaded range of reds in the map represent counties with lower averages and the deeper reds represent higher average fatality counties. The highest range was Hinds County with 39.8 and the lowest was Issaquena with 0.8 for overall fatalities. The two counties have the highest and lowest populations in the state as well.

The weighted averages fatality map shows how the counties rank when the population is weighted – the process of making the data proportionate. Weighting removes the population bias by illustrating the number of fatalities that can be expected in a population of 100,000 people based

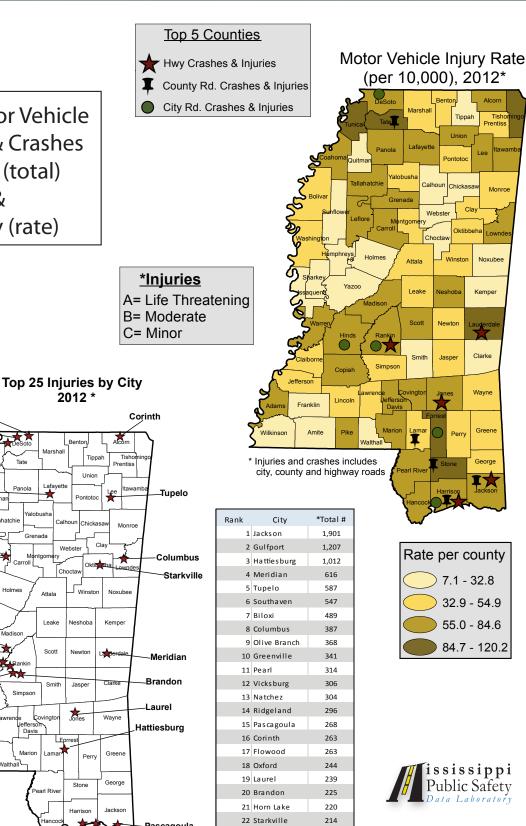
on the actual number of fatalities in that county's population.

The top 5 weighted ranked counties were Issaquena (57.7), Holmes and Covington (50.0), Jefferson (49.8) and Tunica (49.6). The lowest ranked weighted counties were Madison (8.1), Clay (8.8), Oktibbeha (10.8), Webster and Choctaw (12.0).

There is value in a weighted map. While more total fatalities are found in larger counties, it does not mean that those county's roads are any less safe than the smaller counties. In fact, many smaller counties actually have a higher proportion of fatalities.

CHAPTER TWO DATA

2012 Motor Vehicle Injuries & Crashes by City (total) County (rate)



23 Clarksdale

25 Greenwood

24 Clinton

205

198

187



2012 *

Source: MS DPS

Map 3 shows the 2012 motor vehicle injury rate (per 10,000 people) by county and the top 25 cities. Both maps include the three categories of injuries (life threatening, moderate, and minor).

The ranges for the motor vehicle injury rate per county are shown as the lightest shaded counties with the lowest injuries per county, with Issaquena (7.1), and the highest, Forrest County (120.2), in the darkest color range, followed by Tunica (108.6). Symbols on the map show the five counties with the

highest highway crashes and injuries, the highest county road crashes and injuries, and the highest city roads crashes and injuries.

The top 25 injuries by city map show which Mississippi cities the most injuries were found due to traffic crashes. The table shows the actual number for each city, with Jackson being the highest with 1,901 injuries, followed by Gulfport (1,207), Hattiesburg (1,012), Meridian (616) and Tupelo (587).

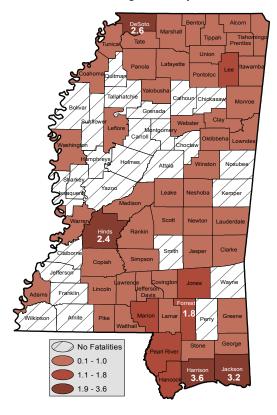
The price tag for crashes comes at a heavy burden for Americans at \$871 billion in economic loss and societal harm.

- NHTSA, 2014

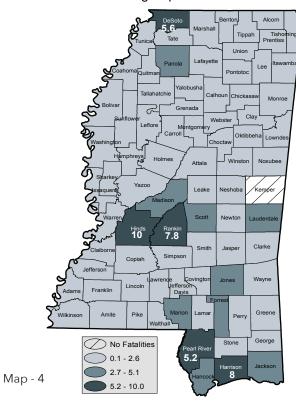


DATA

Average Motorcycle Fatalities *

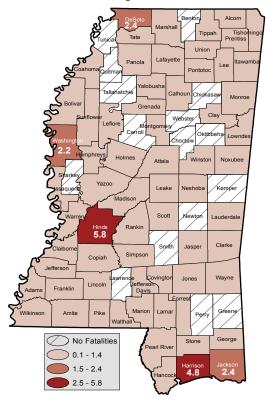


Average Speed-Related Fatalities *



Average Fatalities * 2008-2012

Average Pedestrian Fatalities *



*Average # of fatalities per year based on total

Source: MS DPS



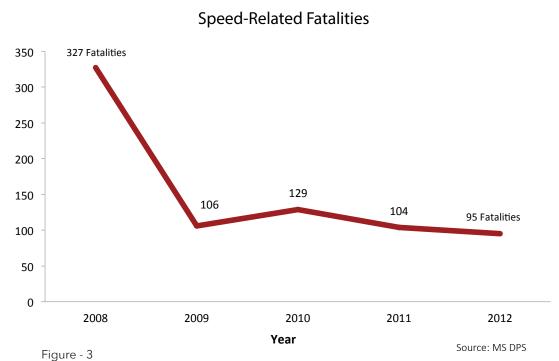


Figure 3 shows the speed-related fatalities in Mississippi between 2008 and 2012. The highest year was in 2008 with 327 deaths. There was a dramatic drop in 2009 to 106 deaths. There has been a fairly stable trend since 2009 with an average of 109 per year over the past 4 years. 2012 saw the fewest speed-related fatalities with 95.



Map 4, shows the counties with the highest average fatalities involving motorcycles, pedestrians and speed over a five year period (2008-2012). The lighter colors show counties with the least fatalities and the darker colors show the counties with the most fatalities. Counties in white did not have any fatalities during this time period for these types.

Harrison County saw the highest motorcycle fatalities with 3.6, followed by Jackson (3.2), DeSoto (2.6), Hinds (2.4) and Forrest with 1.8.

Hinds County saw the highest speed-related fatalities with 10.0, followed by Harrison (8.0), Rankin (7.8), DeSoto (5.6), and Pearl River (5.2).

Hinds County saw the highest pedestrian fatalities with 5.8, followed by Harrison (4.8), Jackson and DeSoto (2.4), and Washington (2.2).



2012 Mississippi Licensed Drivers

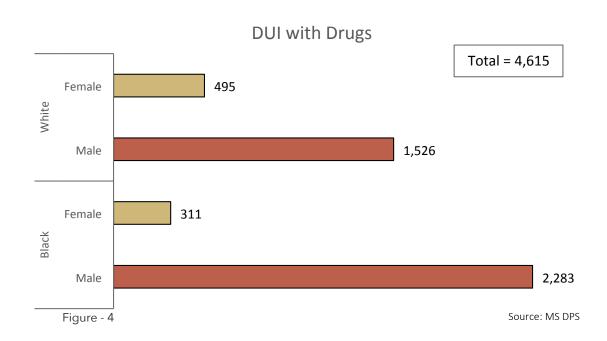
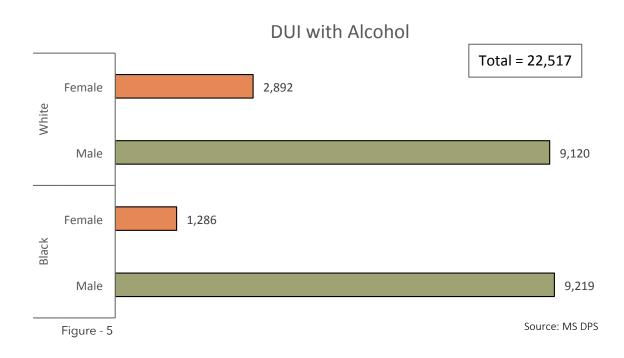
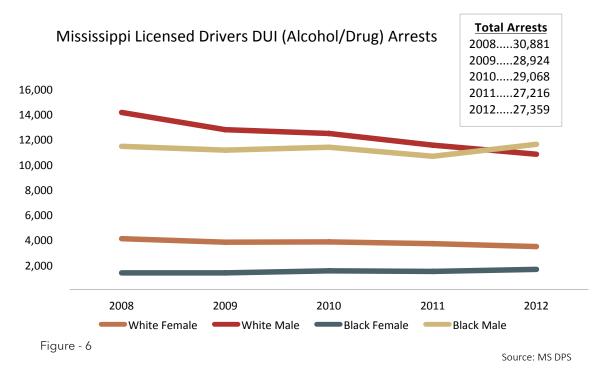


Figure 4 shows Mississippi drivers in 2012 arrested for driving under the influence of drugs (DUID). Black males (2,283) were the largest group to drive while under the influence of drugs, followed by White males (1,526), White females (495) and Black females (311).

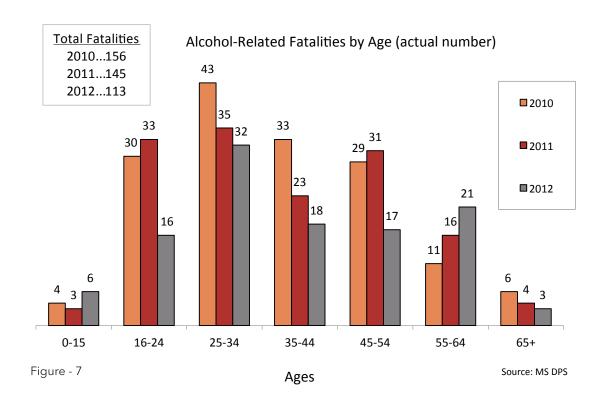
Figure 5 shows Mississippi drivers in 2012 arrested for driving under the influence of alcohol (DUI). Black males (9,219) were the largest group to drive while drinking alcohol, followed by White males (9,120), White females (2,892) and Black females (1,286).





The line graph in figure 6 displays the trend of DUI arrests from 2008-2012 by gender and race. Overall, DUI arrests have declined slightly since 2008 in Mississippi. While White male arrests have steadily declined, Black males have been fairly steady with a slight increase in 2012. White female arrests have seen a small decline over the five year period (with exception in 2010), while Black female arrests have seen a very small increase over the five year period (with the exception of small decreases in 2009 and 2011). White female arrests are approximately twice as high as Black female arrests.

Figure 7 shows alcohol-related fatalities by age from 2010–2012. The 25-34 age group had the highest number of fatalities for all three years, followed by the 16-24 age group, however in 2010 and 2012, the 35-44 age group saw slightly more fatalities than the 16-24 age group. As the trend chart shows, the older the age cohort, the lower the fatalities. The overall totals for alcohol-related fatalities were as follows; 2010 (156), 2011 (145), and in 2012 (113).

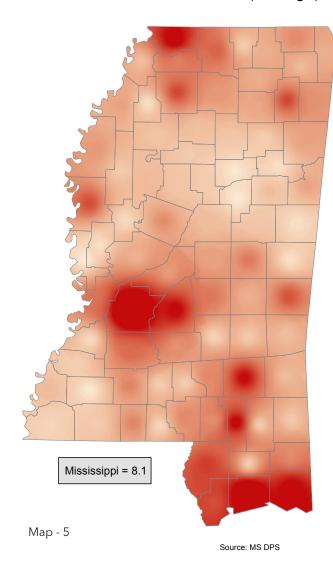


DATA

Map 5 displays motor vehicle fatalities from 2008-2012 (average) in a hot spot style visual. Overall, Mississippi counties average 8.1 fatalities. The lowest range as shown in the light reds was 0.8, with darkest red showing the highest fatality rate with 39.8 (Hinds).



Motor Vehicle Fatality "Hot Spots" by County 2008-2012 (average)





Rank	County	*Average
1	Hinds	39.8
2	Harrison	29.0
3	Desoto	22.0
4	Ja cks on	21.4
5	Forrest	20.6
6	Rankin	20.4
7	Jones	20.0
8	Pearl River	15.8
9	Panola	15.0
10	Lee	15.0
11	Hancock	14.4
12	Washington	14.4
13	Lauderdale	14.0
14	Marshall	12.8
15	Copiah	12.2
16	Warren	11.6
17	Scott	11.2
18	Neshoba	11.0
19	Tate	10.4
20	Lincoln	10.2



We still have a long way to go, but with everyone's help we are getting closer and closer to zero fatalities.

- Albert Santa Cruz, Department of Public Safety Commissioner

2012 Motor Vehicle Crash Points Total = 65,536 crashes Map - 6 ississippi Public Safety Data Laboratory

Map 6 shows a point (latitude and longitude) for each of the 65,536 crashes in 2012 in the state of Mississippi. In the 3D map you can see the raised red and orange spikes where a high volume of crashes occurred. The flatter, greener points are crash sites, but at a much lower volume.

Source: MDOT, Safety Analysis Management System

SEAT BELT USE & MISSISSIPPI

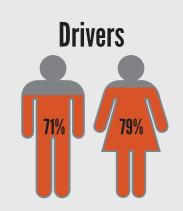
Data is based on findings from NHTSA, MS DPS, and surveys conducted by the J. W. Landrum Observational Survey Laboratory at Mississippi State University. All data is from 2013 unless otherwise noted.

Mississippi: 740%

National: 87%

9% DECREASEIN USAGE RATES
FROM **2012-2013***

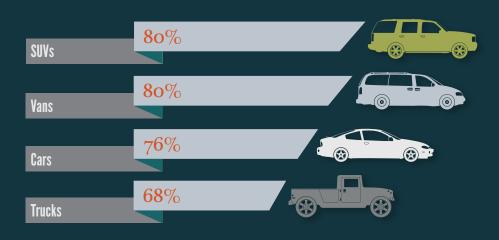






Seat Belt Usage

*This could be due to the New Methodology used.



VEHICLE TYPE & USAGE RATES (observational survey)



Interstates and expressways had the highest usage among road types at 85%



Child restraint usage was 84%

That is a 14% increase from 10 years ago



The age group (2008-2012) with the highest fatal unbelted occupants was 10-15 with **88%**

of the teens killed in traffic crashes during 2012 were unbelted



It is estimated that 203 lives were saved in Mississippi as a result of seat belt use in 2012





Seat Belt Usage

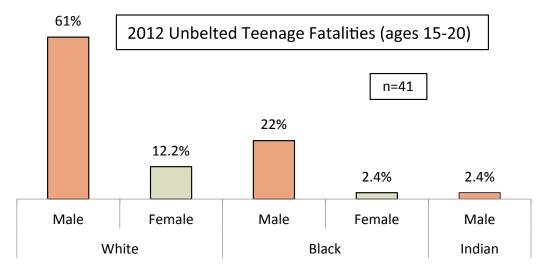


Figure - 8 Source: MS DPS

Figure 8 shows the race and gender of the 41 unbelted teenage fatalities in 2012. White males were the largest percentage with 61%, followed by Black males (22%), White females (12.2%) and also Black females and Indian males (2.4%).

We are getting our message of zero tolerance for drinking and driving across as well as the fact that

SEATBELT VIOLATORS WILL BE TICKETED.

More people are listening and more lives are being saved.

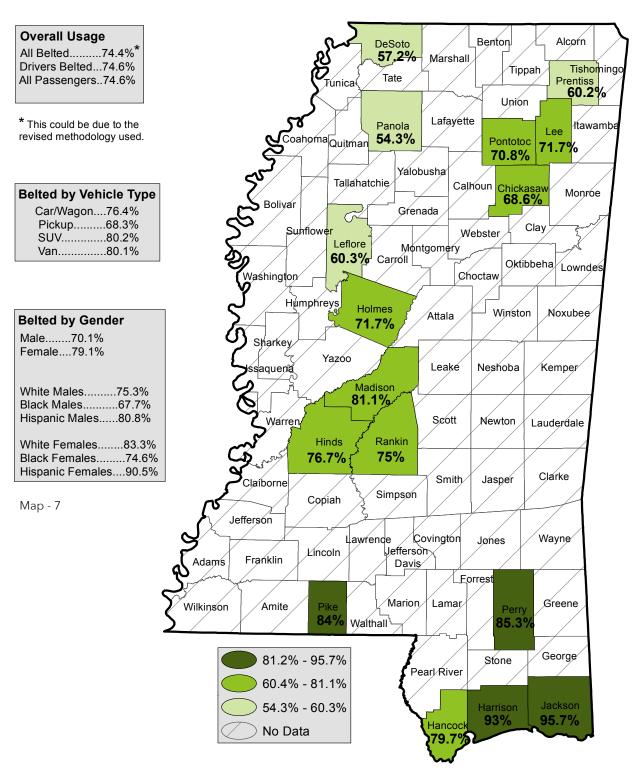
- Col. Donnell Berry, Director of the Mississippi Highway Safety Patrol

Click It or Ticket

"Click It or Ticket" is a high visibility law enforcement and media campaign. National Highway Traffic Safety Administration provides funding for national media promotion and to the states for additional law enforcement efforts and local media advertising. The purpose is to raise awareness of the importance of wearing seatbelts.

During the 2012 Memorial Day campaign period there were 15,230 hours of additional enforcement, 713 checkpoints, and 11,833 safety restraint citations issued, and various other types (38,049). The paid media campaign consisted of: 1,582 TV spots, 4,402 radio spots, 4 print ads, 26 billboards, 2,555 movie screenings, and 5 internet advertisements along with bonus spots and earned media spots.

Observational Seat Belt Use (post Click it Or Ticket campaign) 2013



Source: J.W. Landrum Observational Survey Laboratory, Mississippi State University

Map 7 represents the findings from the 2013 observational survey of Mississippi drivers. Overall, 74.4%* of occupants were belted, 74.6 % of drivers were belted, and 74.6% of passengers were belted. Hispanic females (90.5%) were the most belted drivers observed, followed by White females (83.3%), Hispanic males (80.8%), White males (75.3%), Black females (74.6%), and Black males (67.7%).

Teen Motor Vehicle Fatalities

there were 57 teen fatalities last γear



• 12 Females 45 Males







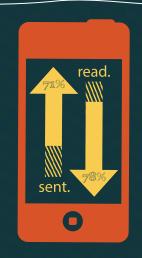
the internet is fast, you don't need to be



happen on

Wednesdays & Saturdays

over 70% of teens and young adults admit to reading/sending texts while driving







of the teen fatalites were alcohol related

{ONLY 13 out of the 57 were tested}

In 2012, Mississippi teenage drivers were involved in a total of 15,471 motor vehicle crashes. These crashes resulted in 67 deaths – 57 of those being teenagers. The total number of injuries from the crashes were 4,473.

There were 1,776 teenagers (ages 15-20) arrested for driving under the influence of alcohol in 2012. There were 1,040 teenagers (ages 15-20) arrested for driving under the influence of drugs in 2012.

Overall, 82% of the teenage fatalities in 2012 were unbelted. Other high risk influences which may have contributed to fatalities include: teens that were speeding (25%) and teens driving under the influence (14%).

Motor vehicle crashes are the leading cause of death of U.S. teens. In 2010, seven teens ages 16 to 19 died every day from motor vehicle injuries.

- CDC

Figure 9 shows the race and gender of the 57 teenage fatalities in 2012. White males were the largest percentage with 54.4%, followed by Black males (22.8%), Black and White females (10.5%) and Indian males (1.8%).

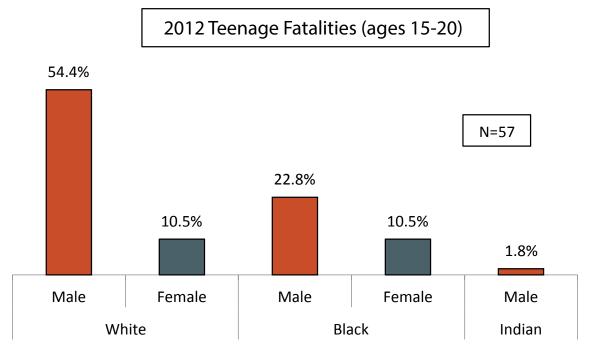


Figure - 9 Source: MS DPS

DATA

Teen Fatalities Tested for BAC, 2012

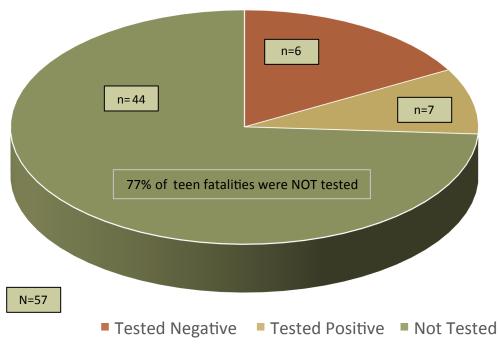


Figure - 10

Source: MS DPS

Figure 10 represents the number of teenager fatalities in 2012 that were not tested for blood alcohol content (BAC). Out of the 57 teens that died in a traffic crash, only 13 were tested for the BAC in their systems. Of the 13 that were tested, 7 tested positive.

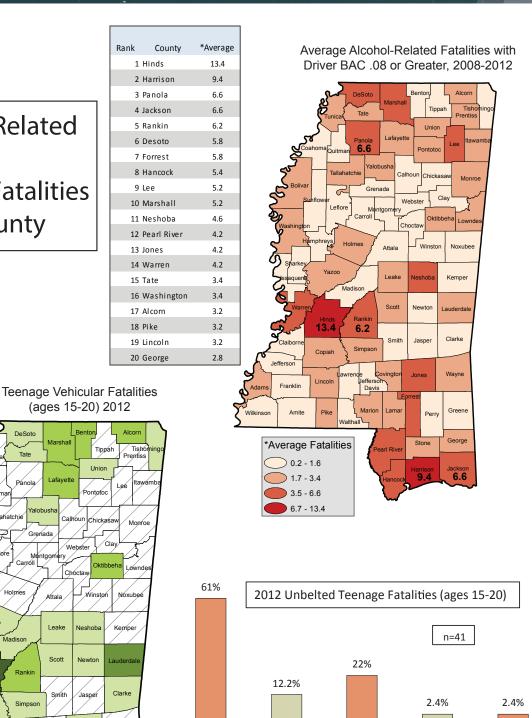
Map 8 shows the average number of fatalities (red color ranges) with a driver BAC equal or greater than 0.08% for all counties in Mississippi. Hinds County had the highest average per year (13.4), followed by Harrison (9.4), Panola and Jackson (6.6), and Rankin (6.2).

The map with the green color ranges displays the teenage fatalities in 2012. Hinds and Greene County had the highest number (4), followed by Harrison,

Jackson, Lauderdale, and Warren (3). Most alarming is that 8 out of 10 of the fatalities were not wearing a seatbelt.

The chart shows the teenage fatalities that were speed-related by race and gender. Of the 57 teenage fatalities, 17 were speed-related. White males made up more than half (52.9%), followed by Black males (35.3%), and White females (11.8%).

Alcohol-Related **Teenage Fatalities** by County



(ages 15-20) 2012 57 total fatalities Tippah 82% were unbelted Copiah Daviş No Fatalities 1 Fatality 2 Fatalities 3 Fatalities Map - 8 4 Fatalities

Male Female Male Female Male White Black Indian

Source: MS DPS

NISSISSIPPI INISSISSIPPI IMIT 55

ROADWAYS

The mission of public traffic safety agencies is to drive down fatalities, and injuries.



5 seconds

is the average time γour eyes are off the road while texting. When traveling 55 mph, that's enough time to cover the length of a football

field - blindfolded.

Distracted Driving

9% of all fatal crashes had at least one distraction

Motorcyclist (2008-2012)

61% of fatalities were between ages 25 & 54

Speeding and failure to keep in lane/yield

are the top reasons for crashes

Of the 226 fatalities,

13% were not wearing a helmet

Alcohol-Impaired Impaired Drivers

Fatalities - Top 5 Jackson......20

Jackson......20 Hattiesburg....9 Gulfport......9 Greenville.....5 Brandon.....5

(2012)

fatalities incresed by

15% (ages 65-74) compared to prior 4 year average

4 Most Common Distractions Mississippi Motor-Vehicle Fatality - Cellphone Use Drivers are - Talking 8 times Rate 22.5 (per 100,000) (2008-2012) - GPS use more likely to cause a - Eating & Drinking crash when texting Motor vehicle accidents are the leading cause of death in children Drivers are 4 times ages 1-17 660,000 more likely to cause a crash when intoxicated 16% of all leen Drinking fatalities were caused by speeding use cell phones or 30% occured on other electronics roads with 55 mph speed limit. while driving Speeding that they have: 16% male 200 lo 2905 45-54 Texted or emailed A700 were alcohol impaired

According to YRBSS (2013) - 9th to 12th grade teens reported in the last 30 days who had been Seat Belt Use (2012) . • • **78%** of fatalities (ages 10-24) were not

wearing a seat belt

Bicyclists (2008-2012)

accounted for 29

of all traffic - related

fatalities

PERSONAL STORY

ROBERT HANCOCK'S STORY

Most law enforcement officers have been first-on-thescene after a motor vehicle accident caused by drunk driving. And some have, themselves, become the victim of a motor vehicle crash caused by a drunk driver. This is the life-changing experience of Robert Hancock, the Traffic Records Coordinator and Law Enforcement Liaison for the Mississippi Office of Highway Safety.

On March 23 2002, Robert was a law enforcement officer with the Pearl Police Department and had five minutes left of his shift that day when a call was dispatched that a car was speeding excessively and had clipped two cars heading towards Highway 80.

nerve in his right eye. It wasn't until he was pulled from the car that Robert began to realize the extent of his injuries.

"That seatbelt did its job and saved my life. I remember they pulled me out of the car and I was on the ground. I came to and was in a daze. I knew there had been a crash, but I thought I was ok – I was more worried about the other driver. When I tried to stand up I realized I didn't have any feeling in my right leg; that was when I knew it had been severely injured."

Doctors initially stated that he had a 95% chance that he would lose his leg due to its extensive injuries. According to Robert, their skill, his perseverance, and his faith in God worked together and he was able to

"As I tipped over the top of that hill, he was coming through the intersection in the wrong lane of traffic . . . I had my lights and sirens on, I tried to move over to the shoulder. . . but he **hit me head-on**."

"As I tipped over the top of that hill, he was coming through the intersection in the wrong lane of traffic," Robert recalled. "I had my lights and sirens on, I tried to move over to the shoulder as much as I could, but he hit me head-on with an estimated speed of 85mph in a 25 mph zone. The crash was severe"

The drunken driver registered a .226 BAC with additional drugs present in his system. He was not wearing a seatbelt and was ejected from his vehicle. He sustained major injuries. Knocked unconscious and trapped in his car, Robert sustained multiple fractures in his right leg, a torn rotator cuff, and damage to a

keep his leg. Since 2002, Robert has undergone 13 surgeries for his leg, knee, ankle, anterior cruciate ligament (ACL), and lateral collateral ligament (LCL). He continues physical therapy as needed.

After the crash in 2002 and a 2006 re-injury, Robert changed a lot of his favorite aspects in life. Activities such as fishing, hunting, golfing, and softball had to be given up or altered due to the stress it put on his leg and the amount of walking involved. Everyday activities like driving became a burden after the crash, requiring Robert to have assistance for almost half a year.

"Here I was, a police officer sworn to serve, protect, and uphold the law. I'm supposed to be protecting you, and now I'm having to have someone come and take care of me because of someone else's negligence."

The surgeries, stress, and physical therapy immediately following the crash were so intensive that Robert felt he left his personal life in the background for a number of years in order to concentrate fully on his recovery. Support from his friends and family—including his law enforcement family—has helped him to bounce back from this life-changing event.

Having been an officer and public servant most of his life, Robert decided to continue his public service by counseling agencies in the effort to improve traffic safety. His career change from a law enforcement officer to the Law Enforcement Liaison gives him the opportunity to help in a different capacity—as he continues to serve the public. One of Robert's primary duties is to assist agencies across the state with securing grants, information, handling overtime money, training and equipment to increase life-saving programs throughout Mississisppi.

Robert also felt that the 2002 crash opened his eyes to the full value and fragility of life. In order to share the importance of sober driving, he began attending and speaking at Mothers Against Drunk Driving (MADD) Victim Impact Panels and school assemblies. At the meetings, Robert would share his experiences dealing with victims of vehicle crashes and how it changed their lives, as well as the lives of others.

"Overall, this had helped me to look at life in a different way and to let people know that it can happen to anyone – even police officers. People often say – It won't happen to me. No matter how great your driving skills are, the truth is – it CAN happen to any given person, at any given time, at any given place. You have a lot to live for. Never take a day for granted."

Robert says that, in his job with Highway Safety, he believes he has found what he is meant to do – returning the favor of love and support from friends and family by continuing outreach and doing mission work in the future. "I think this is where God wanted me to be—to help other people."



AGENCIES & PROGRAMS

Mississippi Department of Public Safety (MS DPS)



The Mississippi Department of Public Safety (MS DPS) is a state level-agency charged with ensuring the safety of every citizen within the state. Under the leadership and authority of the department's commissioner, the governor, and the Colonel of Highway Patrol, various divisions interact to address key safety issues in Mississippi.

Some of the major divisions of MS DPS include the Mississippi Highway Patrol, Mississippi Bureau of Investigation, Mississippi Bureau of Narcotics, Mississippi Homeland Security, Mississippi Crime Lab, Medical Examiner, The Office of Administrative Operations, Law Enforcement Officers Training Academy, Public Safety Planning, and the Motor Carrier Safety Division. MS DPS and its divisions work in unison with other agencies, such as the Mississippi Department of Transportation, the Mississippi Department of Health, and affiliated research institutions to find solutions to public safety concerns. For more information about the various divisions, helpful links to driver's services, a guide to criminal investigation, public safety alerts, and information on current laws and changes to laws, visit dps.state. ms.us.



Mississippi Highway Patrol (MHP)



The Mississippi Highway Patrol (MHP) was formed in 1938 to enforce traffic laws on state and federal highways and to respond to statewide emergencies at the request of the governor. The MHP is a major division within the Mississippi Department of Public Safety that operates in nine districts across the state to assist local law enforcement in all aspects of law enforcement. The mission of the MHP is to encourage and promote the safe operation of vehicles (e.g., the testing and licensing of commercial and non-commercial professionally and impartially enforce laws; act as guardians of public safety; assist other agencies in law and criminal investigations; and create a public persona that enhances the department.

The Mississippi Bureau of Investigation is a division within the MHP. Within the bureau, various programs are available for victims and specialized units such as: Protective Services Unit; Special Operations and Major Crimes Unit; Salvage Inspection Unit; Victim Assistance Program; Mississippi Justice Information Center (MJIC); and the Criminal Information Center (CIC). The Motor Carrier Safety Division is also affiliated within the MHP. Its mission is to ensure that commercial vehicles abide by all the rules and regulations governing their operation. The MHP's headquarters is centrally located in Jackson, Mississippi. To learn more about the MHP, visit dps.state.ms.us.

Mississippi Office of Highway Safety (MOHS)



The Mississippi Office of Highway Safety (MOHS) was created after the National Highway Safety Act of 1966 created a coordinated national highway safety program. MOHS is another major division within the Mississippi Department of Public Safety. MOHS is responsible for administering federal safety grant funds. MOHS reports traffic data to the National Highway Traffic Safety Administration (NHTSA), which houses and reports on national statistics as well as state-to-state comparisons. NHTSA, in conjunction with MOHS, coordinate federal funds for multiple programs surrounding

public safety issues in the state of Mississippi. MOHS work with alcohol/drug countermeasures; occupant restraints; police traffic services; traffic records; youth programs; and many non-profit organizations that directly relate to public safety.

MOHS provides publically assessable data on traffic statistics for grant applications and training purposes. They serve as a central hub for coordination between the federal government and state agencies, assisting with grant proposals and managing grants. MOHS provides information on public safety—with a special emphasis on traffic safety—to state legislators and to the public. To learn more about MOHS, visit www. officeofhighwaysafety.ms.gov.



AGENCIES & PROGRAMS

Mississippi Department of Transportation (MDOT)

The Mississippi Department of Transportation (MDOT) is an agency tasked with maintaining, researching, and improving the transportation infrastructure of the state (roads, rails, maritime, aviation, public transportation, etc.). This encompasses all types of activities including but not limited to: installation of guard rails; pavement and shoulder work; sign supports and utility poles; minor structure replacements or modifications; installation of crash cushions; and a host of public programs to inform drivers how to properly and safely use Mississippi roadways.

MDOT's programs include educating the public with: virtual simulators; conducting child passenger safety lessons for new parents; providing video presentations at schools; and hosting an annual safety fair. This safety fair uses modern technology to educate and inform the public of the consequences of unsafe driving choices including: display of a rollover rover simulator; seat belt convincer crash demonstration; and fatal vision goggles to demonstrate impaired driving. With the expertise from their safety representatives, these MDOT programs provide the public with valuable insight into the tragic consequences of unsafe driving choices.

MDOT provides free resources to help the public deal with traffic. Individuals can dial 511 (nationwide) or sign up for email or text alerts to obtain information on road conditions, road closures, accidents, construction areas, and weather alerts. MDOT maintains a website with live traffic feeds strategically positioned along

major highways. In case of a hurricane, MDOT has a contraflow map, a disaster kit, and an evacuation guide from various southern counties posted on the MDOT website. The hurricane guide also features important contact information such as MDOT, the Federal Emergency Management Agency (FEMA), animal shelters, and much more. MDOT also provides emergency information for events such as tornadoes, hazardous material incidents, earthquakes, flooding, bridge damage, winter storms, plane crashes, train crashes, and homeland security threats.

MDOT spends an estimated \$3 million annually in keeping our highways clean and litter-free. MDOT raises anti-littering awareness among the public by advocating the "Three E's" of litter prevention:

DIAL 511 (NATIONWIDE) OR SIGN UP FOR EMAIL OR TEXT ALERTS TO OBTAIN INFORMATION ON ROAD CONDITIONS, ROAD CLOSURES, ACCIDENTS, CONSTRUCTION AREAS, AND WEATHER ALERTS.

educate; enforce; and eliminate. To learn more about MDOT's statewide media campaign, visit *Think Green, Keep Mississippi Clean*.

MDOT also works with schools across Mississippi via projects like the Statewide Crossing Guard Training Program to develop and implement safe crossings for students in school zones. MDOT also offers the Safe Routes to School (SRTS) program to educate students on pedestrian and bicycle safety. MDOT's website has a host of other programs, resources, and links that can be accessed at mdot. ms.gov.

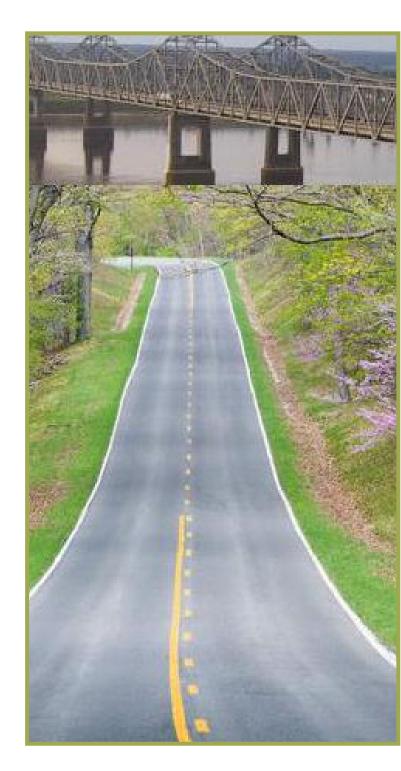
National Highway Traffic Safety Administration (NHTSA)

The National Highway Traffic Safety Administration (NHTSA) is a government agency within the Department of Transportation that works to **reduce fatalities**, **injuries**, and economic losses due to motor

vehicle crashes while upholding their core values of integrity, service, and leadership. It was born out of the Highway Safety Act of 1970 to enforce safety programs. The agency writes and administers federal safety standards for motor vehicles and related equipment, promotes the use of safety belts, investigates safety defects, oversees federal grant funds, and tracks safety-related recalls. NHTSA also implements regulations on fuel economy standards, vehicle theft, and odometer fraud.

NHTSA conducts research on vehicle safety, traffic safety, and behavior of drivers to create effective methods for safety improvements. Examples of studies include crash data collection and analyses, crash tests, research on human behavior, and systematic studies of vehicle units. One way that NHTSA accomplishes this goal is through the New Car Assessment Program (NCAP), which provides customers with comparative safety data when purchasing a new vehicle. NHTSA tests the safety of vehicles and releases the results to help individuals make educated decisions.

While car crashes continue to be a leading cause of death in America, NHTSA has worked to decrease the number of fatalities that have occurred on the road since its establishment. This agency remains committed to attaining the highest level of excellence in highway and motor vehicle safety.



Mississippi Alcohol Safety Education Program (MASEP) MASEP

Mississippi's Implied Consent Law (MS Code 63-11-30) prohibits operation of a vehicle while under the influence of alcohol or another substance that has impaired the person's ability to operate the vehicle. All persons convicted of a first offense violation of this law are required to attend and complete the Mississippi Alcohol Safety Education Program (MASEP). MASEP is a 12-hour education/intervention program with the goal of helping first offenders avoid driving while under the influence of alcohol or other substances in the future.

MASEP began in 1972 as a project by two graduate students at the Social Science Research Center at Mississippi State University. It was initially an optional program offered in five courts in North Mississippi. The program became mandatory statewide in 1981 and now operates in 41 locations in the state. Over 300,000 people have participated in the program since its inception.

The original MASEP curriculum was developed in 1972 with funding from the Governor's Highway Safety Program, The Mississippi Highway Safety Patrol, and the Mississippi Department of Health. At that time, most of those convicted of a first time DUI were thought to be social drinkers, who needed additional knowledge to help them keep from drinking and driving again. Therefore, the curriculum was designed in a lecture format to provide education on the effects of alcohol and how it affects one's ability to drive.

By the mid-1980's the concept of the DUI offender on which the MASEP curriculum was based had been shown to be incorrect.

The Mississippi DUI Probation Project, a study conducted by scientists at the Social Science Research Center and funded by National Highway Traffic Safety Administration, indicated that 57% of MASEP participants could be classified as problem drinkers. Other studies demonstrated that lecture-oriented DUI schools were not effective in reducing DUI rearrest rates.

After an extensive research and development process, a new MASEP curriculum was introduced in 1989. The new curriculum changed from a lecture format to a group intervention approach. Participants completed an assessment of their drinking and emotional problems and received feedback based on their answers to the assessment questions. The development of a written DUI Avoidance Plan for each participant became an integral part of the program.

MASEP is a dynamic program which has evolved over the years. More has been learned about the DUI offender in Mississippi and the evidence based practices which are most effective in reducing recidivism.

- Bill Henderson, MASEP Operations Coordinator

The next curriculum enhancement occurred in 2000. The length of the program was increased from 10 hours to 12, to allow time for more group interaction activities designed to help the participants recognize the problems their drinking was causing in their lives. Added emphasis was placed on the assessment/ feedback and on the development of the DUI Avoidance Plan. The principles of Motivational

Enhancement Therapy were introduced into the program.

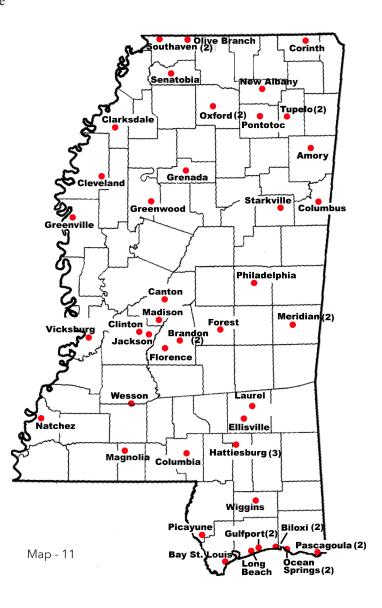
In 2005, additional changes were made to the assessment/feedback procedure. As a result, participants were provided with more information on their chances of being rearrested and their likelihood of having a drinking problem. Also in 2005, MASEP facilitators were trained in Motivational Interviewing strategies and began to incorporate these strategies into the presentation of the curriculum.

In 2008, a substantial revision was made to the MASEP curriculum in order to implement evidence-based substance abuse intervention practices that were adapted to fit the needs of the MASEP participants. These included added motivational components, movement through stages of change, and effective assessment of alcohol and drug problems. A new assessment instrument was developed to better assess alcohol and drug use and related problems. Spanish language materials were developed from the curriculum, and gender specific information for alcohol use, alcohol effects, and health outcomes was incorporated. Additionally, in response to increasing evidence that many MASEP participants were abusing both illegal and prescription drugs as well as alcohol, new content was added to address the use of marijuana and other drugs. . The theoretical basis of the 2008 curriculum is complementary to the 2000/2005 edition and is derived from theoretical concepts of change: (1) the IMB Model (Fisher, Fisher, & Harman, 2003), (2) Enhancing Motivation to Change (Miller & Rollnick, 2002), and (3) Transtheoretical Model of Change (Prochaska & Velicer, 1997).

The goal of MASEP has always been to reduce DUI recidivism by first time offenders in Mississippi and thereby enhance traffic safety. Revisions to the MASEP assessment process and to curriculum content were made with this goal in mind. Additionally, changes to the curriculum were founded on the latest evidence-based practices for motivating alcohol and/or other drug abusers

to change their substance use and driving behaviors. Numerous studies on the effectiveness of MASEP have been conducted throughout the history of the program. These studies have consistently shown that MASEP is effective in reducing recidivism by first time DUI offenders and that the program's efficacy has improved with each revision of the curriculum.

MASEP Locations



AGENCIES & PROGRAMS

Sobriety Trained Officers Representing Mississippi (STORM)

The Sobriety Trained Officers Representing Mississippi (STORM) was founded in 1996; a non-profit whose mission is to increase the ability of law enforcement to combat impaired driving. STORM is comprised of more than 1,300 law enforcement officers. The organization's main objective is to gather the latest information and techniques for finding and apprehending alcohol and drug-impaired drivers and disseminating that information to law enforcement. STORM accomplishes their mission through law enforcement training, education, and a collaborative effort to reduce fatalities due to driving under the influence. The organization hosts a series of events throughout the state for the law enforcement community. For more information visit www.msstorm.net.

Mothers Against Drunk Driving (MADD)

Mothers Against Drunk Driving (MADD) is a national non-profit organization; its mission statement maintains that their goal is "to stop drunk driving, support the victims of this violent crime and prevent underage drinking." The organization was founded in 1980 by Candy Lightner after she lost her daughter to a drunk driver and vowed to put an end to driving under the influence. MADD is supported by the federal government, corporations, educators, media, and the public. MADD's tireless effort has garnered much attention and continues to raise awareness to help save lives from unnecessary deaths due to impaired driving.

MADD marks its success by claiming to have saved over 300,000 lives as a direct result of their anti-drunk

driving programs. Another main goal is to decrease the number of under-aged drinkers through awareness. MADD reaches out to teens with the Power of You(th) program which seeks to encourage teens to take a stand against alcohol abuse before they are of drinking age. Much of MADD's success has been through an ability to raise awareness and garner grassroots support for education and legal changes to combat alcohol and other drug-impaired driving. They utilize a media center that publishes press releases, makes public statements, and issues fact sheets designed to increase public awareness.

MADD has an extensive network of employees and volunteers who continually reach out to the general public, key experts, decision-makers, and community leaders—including researchers, business leaders, educators, and policymakers – in an on-going effort to make America's roadways safer against alcohol and other drug-impaired driving. MADD also works in conjunction with government, law enforcement and the judiciary to help promote driving safety in our communities. They actively work with the National Highway Traffic Safety Association on activities like the "Drive Sober or Get Pulled Over" campaign.

MADD hosts a wide-ranging website that includes victim support, information on how parents can help educate their children about the risks of alcohol and other drug-impaired driving, drunk driving data and statistics, and policy initiatives. In terms of victim support, MADD's outreach includes grief counseling and support for legal complaints and victim's rights. MADD is one of the largest victim services organizations in the U.S. and maintains a 24/7 victim help line. To learn more about MADD, visit www.madd.org.

Drug Abuse Resistance Education (DARE)

The Drug Abuse Resistance Education (DARE) is an international police officer-led series of school-based curriculum that aims to teach effective peer resistance and refusal skills for children from kindergarten through 12th grade. DARE was jointly created in 1983 by the Los Angeles Police Department and the Los Angeles Unified School District. DARE was implemented in Mississippi schools in 1988. Currently, DARE is taught in over 75% of the nation's schools. DARE's mission statement maintains that their goal is to provide students with "good decision-making skills to help them lead safe and healthy lives." By equipping students with the essential skills to avoid involvement in harmful activities, DARE seeks to create "a world in which students everywhere are empowered to respect others and choose to lead lives free from violence, substance abuse, and other dangerous behaviors."

DARE credits its success to the critical review and contributions of leading experts in the field of education, science, and law enforcement. Not only does the DARE program teach students to refuse drugs, it also focuses on decision making, consequences, risks, health effects, friendships, role-playing scenarios, peer pressure, confidence in refusing offers, and ways to be in charge. For example, DARE officers are trained to coach students on research-based refusal techniques to effectively cope with pressure from peers to engage in drug use.

Law enforcement officers receive 80 hours of training in areas such as child development, classroom management, youth development, and effective communication prior to entering the DARE program. Instructors wishing to teach high school students are required to complete an additional 40 hours of DARE curriculum training. In addition to giving youth the information and tools to avoid negative influences, the program attempts to establish a positive relationship between the students and law enforcement officers, teachers, parents, and other community leaders. To learn more about DARE, visit www.dare.org.

Mississippi Department of Mental Health (DMH)

The Mississippi Department of Mental Health (DMH) administers alcohol and drug abuse prevention and treatment services. DMH is committed to cost-effective care and rehabilitation of individuals in need of treatment for alcohol and other drug abuse. Other services available include: prevention; counseling (family or individual); outreach/after care; residential treatment (including detoxification); transitional residential care; vocational counseling; and emergency care – including a 24 hour hotline.

DMH offers the diagnostic assessment and treatment required for repeat DUI offenders. There are 28 centers throughout Mississippi where individuals can complete the DUI diagnostic assessment. The purpose of the assessment is to evaluate an individual's alcohol/drug dependency. Results from the DUI diagnostic assessment determine the plan of treatment for individuals. Many of the centers provide a 10-week intensive drug and alcohol outpatient treatment program that is designed so that it interrupts employment and/or school as little as possible. Special populations such as women, children, and the elderly have services tailored for their needs. To learn more about DMH's Alcohol and Drug Services, visit www. dmh.ms.gov/alcohol-and-drug-services.

AGENCIES & PROGRAMS

Developing Resources for Education in America (DREAM)

Founded in 1981, DREAM has been a pioneer in grassroots substance abuse prevention efforts at the local level and catapulted into providing innovative prevention materials and training at the state and national levels. Over its thirty-year history, DREAM has managed multi-million dollar state and federal grant programs and contracts, served as fiscal agent for several programs, and coordinated conferences and special events. DREAM is primarily funded through grants, product sales, and fees for services such as training, keynote speeches, and project management. DREAM's mission is to prevent youth substance abuse and promote healthy life styles through developing and providing effective products and services for schools, communities, and businesses.

In October 2012, DREAM, Inc. received a grant through the Mississippi Office of Highway Safety to reduce impaired driving and increase seat belt usage among Mississippi's teens. This is being accomplished through a variety of youth-focused initiatives.

The most dangerous time of a teen driver's life is the first 12 months of independent licensure.

- National Safety Council

Student Advisory Board (SAB)



The Mississippi Student Advisory Board (SAB) is made up of 30 youth leaders in grades 9th-12th from across Mississippi who help plan initiatives on highway safety issues. The SAB meets one weekend a month, ten months out of the year. The youth are trained in leadership, impaired driving prevention, seat belt safety and other highway safety issues so that they can coordinate efforts in their respective communities.

A teen driver's crash risk is **3x** that of more experienced drivers

- National Safety Council

Rock the Belt



Rock the Belt is an interactive youth-focused program that promotes seat belt safety through the use of healthy competition. It is one of the most fun ways for youth to understand the importance of seat belt use. Rock the Belt provides a seat belt safety camp for teens during the deadliest time of year for teens – the summer months. It encourages everyone to buckle up, every time, and every trip.

Federal Highway Administration (FHWA)

The Federal Highway Administration (FHWA) is an agency within the U.S. Department of Transportation that provides stewardship over the construction, maintenance and preservation of the Nation's highways, bridges, and tunnels. FHWA also conducts research and provides technical assistance to state and local agencies in an effort to improve safety, mobility, and livability, and to encourage innovation. To learn more about the FHWA, visit fhwa.dot.gov.

Federal Motor Carrier Safety Administration (FMCSA)

The Federal Motor Carrier Safety Administration (FMCSA) is an agency within the U.S. Department of Transportation. It was created via the Motor Carrier Safety Improvement Act of 1999. FMCSA works to prevent commercial motor vehicle-related fatalities and injuries by enforcing safety regulations, targeting highrisk carrier and drivers, improving safety information systems and technology, strengthening operating standards, and increasing safety awareness. To learn more about FMCSA, visit fmcsa.dot.gov.



The human toll is **TRAGIC**.

DOT reports that in 2009, more than 5,400 people died in crashes linked to distraction and thousands more were injured.

> - David Michaels, Assistant Secretary for OSHA

RESOURCES

Agencies & Programs

Alcohol Services Center P: 601.948.6220 www.alcoholservices.org

Drug Abuse Resistance Education (DARE) Phone: 662.680.6037 www.darems.org

Developing Resources for Education in America, Inc. (DREAM) Phone: 800.223.3273 OR 601.933.9199 www.dreaminc.org

Federal Highway Association Phone: 601.932.2522 www.fhwa.dot.gov/msdiv/

Mississippi Alcohol Safety Education Program (MASEP) Phone: 800.678.2534 OR 662.325.3423 www.ssrc.msstate.edu/divisions/masep/

Mississippi Department of Transportation (MDOT) Phone: 601.359.7001 http://mdot.ms.gov

Mississippi Attorney General's Office Phone: 601.359.3680 www.ago.state.ms.us Mississippi Highway Patrol (MHP) Phone: 601.987.1212 www.dps.state.ms.us/highway-patrol/ mississippi-highway-patrol/

Mississippi Crime Lab
Phone: 601.987.1600
www.dps.state.ms.us/crime-investigation/
crime-lab/

Mississippi Department of Education Phone: 601.359.3513 www.mde.k12.ms.us

Mississippi Department of Mental Health Phone: 601.359.1288 www.dmh.ms.gov

Mississippi Department of Rehabilitation Services Phone: 800.443.1000 www.mdrs.ms.gov/Pages/default.aspx

Mississippi Emergency Management (MEMA) Phone: 866.519.6362 www.msema.org Mississippi Office of Highway Safety (MOHS) Phone: 601.977.3700 www.officeofhighwaysafety.ms.gov

Mothers Against Drunk
Driving (MADD)
Phone: 601.982.5668
www.madd.org/local-offices/ms/

National Highway Traffic Safety Association (NHTSA) Phone: 1.888.327.4236 www.nhtsa.gov

Students Against Destructive Decisions (SADD) Phone: 877.723.3462 www.sadd.org

Safe Kids Mississippi Phone: 601.815.6212 www.safekids.org/coalition/safekids-mississippi

Sobriety Trained Officers Representing Mississippi (STORM) Phone: 662.508.0078 www.msstorm.net

Mississippi Office of Highway Safety

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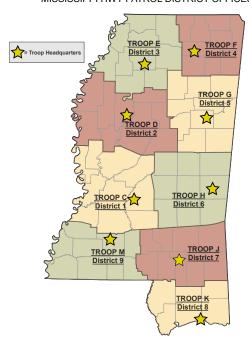
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